

ISSUE FEE TRANSMITTAL

560.00-142
15.00-501Department of Commerce
Patent and Trademark Office

This form is provided in lieu of a formal transmittal and should be used for transmitting the Issue Fee. Sections 1A through 4 must be completed as appropriate.

INVENTOR(S) ADDRESS CHANGE | SC/SERIAL NO. 1101

INVENTOR'S NAME 1986

Street Address 753
3-11-84

City, State and Zip Code 4588585

CO-INVENTOR'S NAME 5-13-86

Street Address ISS NO. 19

City, State and Zip Code STATUS 100

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MAILING INSTRUCTIONS

All further correspondence including the Issue Fee Receipt the Patent, and advanced orders will be mailed to the addressee entered in Section 1 on PTOL-85c, unless you direct otherwise by specifying the appropriate name and address in 1A below.

2A. The COMMISSIONER OF PATENTS AND TRADE-MARKS is requested to apply the Issue Fee to the application identified below.

(Signature of party in interest of record)

(Date)

Note: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
06/655,897	09/28/84	010	HAZEL, B	127 01/10/86
First Named Applicant	MARK, DAVID F.			

TITLE OF INVENTION HUMAN RECOMBINANT CYSTEINE DEPLETED INTERFERON -B NUTEINS
(AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
20032A	424-085.003	H80	UTILITY	NO	\$560.00	04/10/86

1A. Further correspondence to be mailed to the following:

CETUS CORPORATION
1400 Fifty-Third Street
Emeryville, California 94608

2B. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1	Albert P. Halluin
2	Leona L. Lauder
3	Thomas E. Ciotti

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02/21/86 655897

4 142

560.00 EK
15.00 EK

02/21/86 655897

4 501

3. ASSIGNMENT DATA (print or type)

- A. (1) ☐ This application is NOT assigned.
 (2) ☒ Assignment previously submitted to the Patent and Trademark Office:
 (3) ☐ Assignment submitted herewith.

B. For Printing On The Patent: (Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data below is only appropriate when an assignment has been previously submitted to the PTO or is submitted herewith. Completion of this form is NOT a substitute for filing of an assignment as required by 37 C.F.R. 1.334).

(1) NAME OF ASSIGNEE:
CETUS CORPORATION(2) ADDRESS: (City & State or Country)
Emeryville, California 94608(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION:
Delaware

4.

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☒ Issue fee ☐ Advanced order ☐ Assignment recording.

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ISSUE FEE TRANSMITTAL

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1. ALBERT P. HALLUIN CETUS CORP., 1400 FIFTY-TH ST., EMERYVILLE, CA 94608	2A. The COMMISSIONER OF PATENTS AND TRADE-MARKS is requested to apply the Issue Fee to the application identified below.	
	(Signature of party in interest of record) <i>Albert P. Halluin</i>	(Date) 1/17/86
	Note: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.	

SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
06/0554897	09/23/84	010	HAZEL, D	01/10/86
First Named Applicant	MARKET DAVID F.			

 TITLE OF INVENTION: HUMAN RECOMBINANT CYSTEINE DEPLETED INTERFERON - B MUTELING
 (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
20832A	724-035.003	H90	UTILITY	NO	4560.00	01/10/86

1A. Further correspondence to be mailed to the following: CETUS CORPORATION 1400 Fifty-Third Street Emeryville, California 94608	2B. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. 1 Albert P. Halluin 2 Leona L. Lauder 3 Thomas E. Ciotti
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INVENTOR(S) ADDRESS CHANGE; SERIAL NO. 06/655,897

MAILING INSTRUCTIONS.

INVENTOR'S NAME

1) David F. Mark

Street Address

217 Standbridge Court

City, State and Zip Code

Danville, California 94526

CO-INVENTOR'S NAME

2) Leo S. Lyn

3) Shi-da Yu Lu

Street Address

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366 Euclid Avenue, No. 109

City, State and Zip Code

Fremont, California 94539 Oakland, CA 94610

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2A. The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified by the number in 1A below.

(Signature of party in interest of record)

Albert P. Halluin

(Date)

3/12/86

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SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
06/655,897	9/28/84	010	Hazel, B. 127	3/12/86
First Named Applicant	David F. Mark			

TITLE OF INVENTION HUMAN RECOMBINANT CYSTEINE DEPLETED INTERFERON-BETA MUTEINS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2083.2A	424-085.003	M80	Utility	No	\$560	4/10/86
30052	03/13/86	655897	03-1260	030	142	560.00CH
30053	03/13/86	655897	03-1260	030	501	15.00CH

1A. Further correspondence to be mailed to the following:

Albert P. Halluin, Esq.

Patent Department

Cetus Corporation

1400 Fifty-Third Street

Emeryville, California 94608

2B. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

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2 Leona L. Lauder

3 Thomas E. Cloutier

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Cetus Corporation

(2) ADDRESS: (City & State or Country)

Emeryville, California 94608

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION:

Delaware

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